

County: Kenosha
 GRANDE PRAIRIE HEALTH & REHABILITATION
 10330 PRAIRIE RIDGE BOULEVARD

Facility ID: 3850

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PLEASANT PRAIRIE 53152 Phone: (262) 612-2800

Operated from 8/8 To 12/31 Days of Operation: 146

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/00): 30

Total Licensed Bed Capacity (12/31/00): 118

Number of Residents on 12/31/00: 29

Ownership:

Highest Level License:

Operate in Conjunction with CBRF? No

Title 18 (Medicare) Certified? Yes

Average Daily Census: 13

Corporation

Skilled

Services Provided to Non-Residents			Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)		%
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	100.0		
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years	0.0		
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	6.9	More Than 4 Years	0.0		
Day Services	No	Mental Illness (Org./Psy)	27.6	65 - 74	13.8				
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	34.5				100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	41.4	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	3.4	Full-Time Equivalent			
Congregate Meals	No	Cancer	10.3		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	6.9		100.0	(12/31/00)			
Other Meals	No	Cardiovascular	10.3	65 & Over	93.1	-----			
Transportation	No	Cerebrovascular	17.2	-----	-----	RNs	22.4		
Referral Service	Yes	Diabetes	3.4	Sex	%	LPNs	0.0		
Other Services	Yes	Respiratory	3.4	-----	-----	Nursing Assistants			
Provide Day Programming for		Other Medical Conditions	20.7	Male	37.9	Aides & Orderlies			
Mentally Ill	No	-----	-----	Female	62.1				
Provide Day Programming for			100.0	-----	-----				
Developmentally Disabled	No				100.0				

Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Managed Care			Percent Of All Residents	
	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem		Total
			Rate			Rate			Rate			Rate			Rate		
Int. Skilled Care	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Skilled Care	5	100.0	\$275.00	13	86.7	\$100.37	0	0.0	\$0.00	8	100.0	\$165.00	1	100.0	\$375.00	27	93.1%
Intermediate	---	---	---	2	13.3	\$85.29	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	2	6.9%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	5	100.0		15	100.0		0	0.0		8	100.0		1	100.0		29	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
				% Needing Assistance of	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	% Independent	One Or Two Staff		
Private Home/No Home Health	32.5	Daily Living (ADL)				
Private Home/With Home Health	10.0	Bathing	6.9	69.0	24.1	29
Other Nursing Homes	27.5	Dressing	24.1	51.7	24.1	29
Acute Care Hospitals	27.5	Transferring	41.4	34.5	24.1	29
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	44.8	34.5	20.7	29
Rehabilitation Hospitals	0.0	Eating	69.0	10.3	20.7	29
Other Locations	2.5	*****				
Total Number of Admissions	40	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	10.3		Receiving Respiratory Care	3.4
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	34.5		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	27.3	Occ/Freq. Incontinent of Bowel	27.6		Receiving Suctioning	0.0
Other Nursing Homes	27.3				Receiving Ostomy Care	0.0
Acute Care Hospitals	9.1	Mobility			Receiving Tube Feeding	0.0
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	3.4		Receiving Mechanically Altered Diets	17.2
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care			Other Resident Characteristics	
Deaths	36.4	With Pressure Sores	10.3		Have Advance Directives	72.4
Total Number of Discharges		With Rashes	3.4		Medications	
(Including Deaths)	11				Receiving Psychoactive Drugs	44.8

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	Ownership:			Bed Size:		Licensure:		All	
	Proprietary			100- 199		Skilled		Facilities	
	This Facility	Peer Group	Ratio	Peer Group	Ratio	Peer Group	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	11.0	82.5	0.13	83.6	0.13	84.1	0.13	84.5	0.13
Current Residents from In-County	89.7	83.3	1.08	86.1	1.04	83.5	1.07	77.5	1.16
Admissions from In-County, Still Residing	65.0	19.9	3.27	22.5	2.89	22.9	2.84	21.5	3.02
Admissions/Average Daily Census	307.7	170.1	1.81	144.6	2.13	134.3	2.29	124.3	2.48
Discharges/Average Daily Census	84.6	170.7	0.50	146.1	0.58	135.6	0.62	126.1	0.67
Discharges To Private Residence/Average Daily Census	23.1	70.8	0.33	56.1	0.41	53.6	0.43	49.9	0.46
Residents Receiving Skilled Care	93.1	91.2	1.02	91.5	1.02	90.1	1.03	83.3	1.12
Residents Aged 65 and Older	93.1	93.7	0.99	92.9	1.00	92.7	1.00	87.7	1.06
Title 19 (Medicaid) Funded Residents	51.7	62.6	0.83	63.9	0.81	63.5	0.81	69.0	0.75
Private Pay Funded Residents	27.6	24.4	1.13	24.5	1.13	27.0	1.02	22.6	1.22
Developmentally Disabled Residents	0.0	0.8	0.00	0.8	0.00	1.3	0.00	7.6	0.00
Mentally Ill Residents	27.6	30.6	0.90	36.0	0.77	37.3	0.74	33.3	0.83
General Medical Service Residents	20.7	19.9	1.04	21.1	0.98	19.2	1.08	18.4	1.12
Impaired ADL (Mean)	43.4	48.6	0.89	50.5	0.86	49.7	0.87	49.4	0.88
Psychological Problems	44.8	47.2	0.95	49.4	0.91	50.7	0.88	50.1	0.89
Nursing Care Required (Mean)	4.3	6.2	0.70	6.2	0.70	6.4	0.67	7.2	0.60